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CONFIRMATION NO. 8760

SERIAL NUMBER 10/510,266	FILING OR 371(c) DATE 04/21/2005 RULE	CLASS 435	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 00786/425002
APPLICANTS Clifford J Woolf, Newton, MA;				
** CONTINUING DATA ***** This application is a 371 of PCT/US03/12496 04/23/2003 which claims benefit of 60/376,147 04/29/2002				
** FOREIGN APPLICATIONS *****				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY MA	SHEETS DRAWING	TOTAL CLAIMS 30
				INDEPENDENT CLAIMS 3
ADDRESS 21559				
TITLE Compositions and methods for preventing abuse of orally administered medications				
FILING FEE RECEIVED 995	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	